U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:		Case Number	:		
An appearance is he	reby filed by the unders	igned as attorn	ey for:		
Attorney name (type	or print):				
Firm:					
Street address:					
City/State/Zip:					
Bar ID Number: Telephor (See item 3 in instructions)		Telephone Nu	ımber:		
Email Address:					
Are you acting as lead counsel in this case?			Yes	No	
Are you acting as local counsel in this case?			Yes	No	
Are you a member of the court's trial bar?			Yes	No	
If this case reaches trial, will you act as the trial attorn			Yes	No	
If this is a criminal case, check your status.		Reta	Retained Counsel		
		• •	Appointed Counsel If appointed counsel, are you		
			ederal Defender		
	C	CJA Panel Attorney			
general bar or be granted I declare under penalty of	this Court an attorney must of leave to appear pro hac vice perjury that the foregoing is has the same force and effective.	e as provided for l true and correct.	by local rules 83.1 Under 28 U.S.C.§	2 through 83.14. 1746, this	
Executed on					
Attorney signature:	S/(Use electronic signature	if the appearance	form is filed elect	ronically.)	